#### CIMITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

( check if this is an amendment and name has changed, and indicate change.)

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



SEC USE	SEC USE ONLY								
Prefix	Senal								
DATE RE	CEIVED								

Convertible Note Due M	1ay 31, 2008				10/4753
Filing Under (Check box(es) that	apply): 🔲 Rule 504	☐ Rule 505	Rule 506	☐ Section 4(6)	D ULOE
Type of Filing: D New Filing	☐ Amendment				
		C IDENTIFICA	LTION DATA		
1. Enter the information requested					
Name of Issuer ( check if this	s is an amendment and	name has chan	ged, and indi⇔	ite change.)	
FastShip. Inc. Address of Executive Offices	<u> </u>	S	7:- 6-4-	~	
1700 Market Street, S	(Number and S		•		f (Including Area Code)
				(215) 574-177	
Address of Principal Business Op (if different from Executive Offic	erations (Number and s	Street, City, Sta	ite, Zip Code)	refeprione Numo	er (Including Area Code)
Brief Description of Business		#			PROCESSED
Commercial cargo vessel	design and operati	ion.	•		JUN 2 0 2005
Type of Business Organization  El corporation	☐ limited partnershi	p, already form	ed	Other (please s	THOMSON MINISTER
business trust	☐ limited partnershi	p, to be formed	i	·	
Actual or Estimated Date of Inco Jurisdiction of Incorporation or	Organization: (Enter tw		ostal Service ab	breviation for Sta	stimated te:
GENERAL INSTRUCTIONS				,	·
Federal: Who Must File: All issuers making et seq. or 15 U.S.C. 77d(6).					
When To File: A notice must be the U.S. Securities and Exchange if received at that address after the	e Commission (SEC) on	the exclience in	he date it is te	ceived by the SEC	TI THE STORT OF RACE OF ALL
Where to File: U.S. Securities ar	nd Exchange Commission	n, 450 Fifth St	reet, N.W., W	ashington, D.C. 20	)549 <b>.</b>
Copies Required: Five (5) copies of the signed must be photocopies of the	he manually signed copy	y or bear typed	or printed sign	ratures.	
Information Required: A new filing, any changes thereto, the info	ng must contain all infor ornation requested in Pa	mation requesti	d Åmandmant	e need only report	the name of the issuer and offe tion previously supplied in Par

Filing Fee: There is no federal filing fee.

Name of Offering

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Each executive officer and director of corporate issuers and of corporate gener	ral and managing partner	rs of partnership issuers:
Each general and managing partner of partnership issuers.		
Theck Box(es) that Apply:   Promoter   Beneficial Owner   Executive (	Officer 🖾 Director	General and/or Managing Partner
ull Name (Last name first, if individual)		
Pederson, Einar		
Susiness or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103	•	
Check Box(es) that Apply:   Promoter  Beneficial Owner  Ex Executive (	Officer 12 Director	☐ General and/or Managing Partner
full Name (Last name first, if individual)		
Bullard II, Roland K.		
business or Residence Address (Number and Street, City, State, Zip Code)		
1700 Market Street, Suite 2720 Philadelphia, PA 19103		
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive (	Officer 🖸 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Chambers, Kathryn Riepe		·
Business or Residence Address (Number and Street, City, State, Zip Code)  1700 Market Street, Suite 2720 Philadelphia, PA 1910	03	
Theck Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive (	Officer 🗵 Director	General and/or     Managing Partner
Full Name (Last name first, if individual)		
Giles, David L.	•	
Business or Residence Address (Number and Street, City, State, Zip Codé) 1700 Market Street, Suite 2720 Philadelphia, PA 19103		
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive	Officer	☐ General and/or Managing Partner
Full Name (Last name first, if individual)  Colgan, Dennis		
Business or Residence Address (Number and Street, City, State, Zip Code)		
1700 Market Street, Suite 2720 Philadelphia, PA 19103		
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive	Officer Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)	*	
Riverfront Development Corporation  Business or Residence Address (Number and Street, City, State, Zip Code)  701 North Broadway, Glouchester City, NJ 08030		
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive	Officer	☐ General and/or Managing Partner
full Name (Last name first, if individual)		
Dunn, David E.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Palton Boggs LLP, 2550 M Street, NW, Washington, DC 20037	·	

2. Enter the information requested for the following:

• Each promoter of the issuer, if the issuer has been organized within the past five years;

1. Has t	he issuer so	old, or do	es the issu	er intend t	o sell, to i	non-accred	ited invest	ors in this	offering?			Yes No
		•		wer also is							*******	
2. What	is the min	imum inve				•	•	-	•	••••••	• • • • • • • •	: \$ <u>10,00</u> 0
•		•										Yes No
									•	• • • • • • • • • • •		<b>D</b>
sion o to be list th	or similar re listed is an	muneratio associated the brokes	n for solici i person of or dealer	itation of p ragent of . If more	ourchasers i a broker o than five (S	in connecti r dealer re 5) persons	ion with sal gistered wi to be listed	es of secur th the SEC	ities in the and/or w	firectly, any offering. I with a state ons of such	f a person	
Full Name	(Last nam	e first, if	individual)	· · · · · · · · · · · · · · · · · · ·		<del></del>	<del></del>					<del></del>
N/A												
Business o	r Residence	Address	(Number a	ind Street,	City, Stat	e, Zip Co	de)					
	•											
Name of A	Associated	Broker or	Dealer				<del></del>					
States in V	Vhich Perso	on Listed	Has Solici	ted or Inte	nds to Sol	icit Purch	asers	· . · · ·				
(Check	"All States	" or chec	k individu:	al States) .			• • • • • • • •	• • • • • • • • •	• • • • • • • •	• • • • • • • • •	· · · · · · ·	□ All Stat
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Full Name					(0.)		[]					
\$ J	,								•			
N/A Business of	or Residenc	e Address	(Number	and Street	. City. Sta	te. Zip Co	ode) ·					<del></del>
			(1.02230		,,,	,,						
Name of	Associated	Broker or	· Dealer		·			<del></del>			· · · · · · · · · · · · · · · · · · ·	
States in	Which Pers	son Listed	Has Solic	ited or In	tends to So	licit Purcl	nasers					<del></del>
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N/A	5-:1	4 1 2			. 6: 6:	7:- C	· · · · ·					
Business	or Residen	ce Adares	s (Numb <del>er</del>	and Street	t, City, St	ate, Zip C	-pac)					
	4					<del></del>	<del></del>	·····				
Name of	Associated	l Broker o	r Dealer							•		
States in	Which Per	rson Lister	1 Has Soli	cited or Ir	itends to S	olicit Purc	hasers					
(Check	: "All State	es" or cho	ck individ		)	• • • • • • • •	• • • • • • • • • • • • • • • • • • • •					All Sta
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[ IL ] [MT]	[IN] [NE]	[ IA ] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	(ME) [NY]	-	[MA] [ND]	[ MI ] [OH]	[MN] [OK]	(OR)	[PA]
[RI]	(SC)	[SD]	[TN]	-	[UT]	[VT]		[AW]	[WV]	[WI]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ..... \$\_ □ Common □ Preferred . 40,000 Partnership Interests ...... \$\_ Other (Specify \_\_\_\_ Total ...... \$ 40,000 \$ 40,000 Answer also in Appendix, Column 3, if siling under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors 40,000 Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Security Sold Type of offering Rule 505 Regulation A..... Rule 504 Total ..... 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... Printing and Engraving Costs ..... \$ 2,000\_\_ Legal Fees ..... Accounting Fees..... Engineering Fees Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) Total....

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

tion **ad	Enter the difference between the aggregate offer 1 and total expenses furnished in response to justed gross proceeds to the issuer."	Part C - Question 4.a. This diffe	rence is t	he		<b>5</b> 38,000
esti	icate below the amount of the adjusted gross p i for each of the purposes shown. If the amou mate and check the box to the left of the estimat adjusted gross proceeds to the issuer set forth	rocceds to the issuer used or pro nt for any purpose is not known e. The total of the payments listed	furnish must een	an . zai	•	• 1
			•	Ε	ayments to Officers, Sirectors, & Affiliates	
	Salaries and fees		<u>a</u>	s	····	87 t
	Purchase of real estate		···· 🛮	<b>s</b>		. 🗆 s
•	Purchase, rental or leasing and installation of					
•	Construction or leasing of plant buildings and	facilities	🗅	s	<del></del> ,	□ S
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another		 I S		s
	Repayment of indebtedness		D	s	<del></del>	□ s
	Working capital					
	Other (specify):		<u> </u>	s	<del></del>	_ C S
•				,		
	Column Totals	••••••••	E	J S_	0	=
,	Total Payments Listed (column totals added)					
• • • •		D. FEDERAL SIGNATURE				
follow	suer has duly caused this notice to be signed by ing signature constitutes an undertaking by the of its staff, the information furnished by the is	issuer to furnish to the U.S. Secu	ಗೆರೆಆ ಬಾರ	Exch	ange Comm	ission, upon written re-
Issuer	(Print or Type)	Signature			Da	
Fast	Ship, Inc.	Lay River Ce	bus			6-14-2005
Name	of Signer (Print or Type)	Title of Signer (Print or Type)				
Yath	ryn Riepe Chambers	Executive Vice Presiden	t <sup>·</sup>			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	•								
1	. Is any party described in of such rule?	17 CFR	230.252(c), (d), (	e) or (f) presently	subject to any	of the disqualifica	tion provisions	Yes	No
						•	• • • • • • • • • • • • • • • • • • • •	U	40

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### See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
FastShip, Inc.	Lary Rege Onbus	6-14-2005
Name (Print or Type)	Title (Print or Type)	
Kathryn Riepe Chambers	Executive Vice President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice of Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printer signatures.

1	2		2 3 4							
•			Type of security	·		•		Disquali	fication	
		to sell	and aggregate			under State ULOE (if yes, attach				
		ccredited	offering price		Type of investor and					
	(Part B	s in State -Item 1)	offered in state (Part C-Item!)		amount pur	chased in State C-Item 2)		waiver s	tion of granted)	
				Number of		Number of	;	(Fart E	-ltem1)	
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	•		
AL		110		Tuvestots	AMOUNT		Amount	Ϋ́εs	No	
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·	to non-a	to sell ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item I)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
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